## BEST AVAILABLE COPY Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

		CLAIMS AS	• Column) Column			(Column 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					(Ooldinity 2)		Ė			OR 1 1			
			/0					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		Ľ	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		* -6			X\$ 9=	٠,	OR	X\$18=	•	
INDEPENDENT CLAIMS			2 minus 3 =		-0			X40=	_	OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=	1	OR	+270=		
* If the difference in column 1 is less than zero, ent					"0" in c	olumn 2	L	TOTAL	355	OR	TOTAL		
CLAIMS AS AMENDED - PART II										-	OTHER	THAN	
(Column 1)					nn 2)	(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus *** MULTIPLE DEPENDENT		F CL AINA		Γ	X40=		OR	X80=		
	FIRST PRESE	INTATION OF MI	JUIPLE DEF	PENDEN	CLAIM			+135=		OR	+270=		
							L	TOTAL		OR	TOTAL		
		(Column 1)		(Colur	mn 2)	(Column 3)	A	DDIT. FEE			ADDIT. FEE		
	75.7	CLAIMS		HIGH	EST		Г	1	ADDI-	] [		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	Ī	X40=	-	OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H						
							L	+135=		OR	+270=		
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	ï	
AME	Independent	*	Minus	***		=	r	X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		上			011			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		nber Previously Pa					r foun	nd in the app	ropriate box	in col	umn 1.		